Cervical Cap

Where can you get a cervical cap?

Getting a cervical cap requires an exam, a fitting and a prescription from a qualified health provider. When you are fitted for your cap, it is very important that your provider also offers teaching and some time for you to practice inserting and removing your cap. Call your local family planning clinic for information.

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How the cervical cap works:

The cervical cap is a thimble-shaped rubber cup that fits snugly over the cervix. It is usually used with a small amount of special gel that contains a spermicide (a substance that kills sperm). You insert the cap and spermicide together into your vagina; they act as a barrier that keeps sperm from entering the uterus.

The cervical cap comes in 4 sizes. Each woman must be fitted for her cap by a trained doctor or health provider.

How to use the cervical cap:

- Wash your hands.
- Fill the cap 1/3 full of spermicidal gel. Squeeze the sides of the cap together and put it all the way into the vagina and onto the cervix to form a strong suction. When you are fitted, your doctor or health provider will teach you how to do this correctly.
- You can leave the cap in for up to 48 hours, but you must leave it in place for at least 6 hours after your last sexual intercourse.
- You do not need to add extra spermicidal gel with each intercourse.
- To remove the cap, push the rim away from the cervix.



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- Take good care of your cap by washing it gently in warm water and mild soap.
- Rinse well, pat dry, dust with cornstarch and put the cap back into its case.
- Check the cap for holes or weak spots before using it.
- If you use extra lubricants during sex, be sure that they are water-based like KY liquid. Oil based lubricants like Vaseline or lotions can weaken the rubber and make it crack or tear.

Effectiveness rates:

If a cervical cap is used <u>every time of sexual intercourse</u> and is <u>always used the correct way</u> (perfect use), the effectiveness rate is as high as 91%. Because women do not always use the cap every time or put it in incorrectly, the typical use effectiveness is 80% - 60% or lower; 20-40 women out of 100 could become pregnant within the first year of use.

Benefits of the cap:

The cervical cap may be inserted many hours before sexual intercourse. The cap may be more comfortable for some women than the diaphragm. The cap may be left in place longer than the diaphragm, for up to 48 hours. The cap requires spermicidal gel only at the time of insertion.

The cap often can be used by women whose pelvic muscles cannot hold a diaphragm in place.

Potential side effects or disadvantages:

Some women report odor problems when a cap is left in the vagina for longer than 48 hours. Because women are built differently inside, not all women are able to easily insert and remove the cervical cap. Planning ahead is required. You must be comfortable with inserting and removing the cap.

Due to limited cap sizes, not all women can be fitted properly with a cap.

Potential risks:

Wearing a cap for longer than 48 hours is not recommended because of possible risk of Toxic Shock Syndrome (TSS). Some women who use the cap may be more likely to have abnormal cells on their Pap smears.

Danger signs for TSS:

- Sudden high fever
- Vomiting, diarrhea
- Dizziness, faintness, weakness
- Sore throat, aching muscles and joints
- Rash (like a sunburn)

Other vaginal barrier devices:

Other vaginal barrier devices are now available such as the FemCap and the Lea's Shield. These devices are non-hormonal and made of medical-grade silicone.